

Filing Fee Worksheet

Project Number: 2018.053

Petitioner: Wilson Perez

Number of Acres: 0.14

Number of Street Frontages: 2.00

Non-Profit: No

Linear Feet of New Roadway: 0

New Acres Subdivided (if applicable): 0.00

Area of site disturbance (acres): 0.00

Filing Fees Due at Land Use Petition:

Request(s):	Annexation	\$	750.00
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-

Total: \$750.00

This Calculator is for informational purposes only and all numbers are subject to verification by the Review Planner.

Verified By: Steve Broadwell

Date:

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MAR 20 2018
 CITY OF AURORA
 PLANNING & ZONING DIVISION



Planning and Zoning Division 1 S. Broadway, 2nd Floor, Aurora, IL
phone (630) 256-3080 fax (630) 256-3081 email COAPlanning@aurora-il.org



CITY OF AURORA
PLANNING & ZONING DIVISION

Project Contact Information Sheet

Project Number: 2018.053

Petitioner Company (or Full Name of Petitioner): Wilson Perez

Owner

First Name: Wilson Initial: _____ Last Name: Perez Title: Mr.
Company Name: _____
Job Title: Owner
Address: 619 Parker Ave
City: Aurora State: IL Zip: 60505
Email Address: heavencitizengwp@gmail.com Phone No.: 630-849-5103 Mobile No.: _____

Main Contact (The individual that signed the Land Use Petition)

Relationship to Project: Owner
Company Name: _____
First Name: Wilson Initial: _____ Last Name: Perez Title: Mr.
Job Title: Owner
Address: 619 Parker Ave
City: Aurora State: IL Zip: 60505
Email Address: heavencitizengwp@gmail.com Phone No.: 630-849-5103 Mobile No.: _____

Additional Contact #1

Relationship to Project: Other
Company Name: _____
First Name: Moyet Initial: _____ Last Name: Perez Title: _____
Job Title: _____
Address: 619 Parker Ave
City: Aurora State: IL Zip: 60506
Email Address: moyet78@gmail.com Phone No.: _____ Mobile No.: _____

Additional Contact #2

Relationship to Project: _____
Company Name: _____
First Name: _____ Initial: _____ Last Name: _____ Title: _____
Job Title: _____
Address: _____
City: _____ State: _____ Zip: _____
Email Address: _____ Phone No.: _____ Mobile No.: _____

Additional Contact #3

Relationship to Project: _____
Company Name: _____
First Name: _____ Initial: _____ Last Name: _____ Title: _____
Job Title: _____
Address: _____
City: _____ State: _____ Zip: _____
Email Address: _____ Phone No.: _____ Mobile No.: _____

Additional Contact #4

Relationship to Project: _____
Company Name: _____
First Name: _____ Initial: _____ Last Name: _____ Title: _____
Job Title: _____
Address: _____
City: _____ State: _____ Zip: _____
Email Address: _____ Phone No.: _____ Mobile No.: _____